

CLAIMS ONLY	Application Number	Filing Date
	10/802617	
	Applicant(s)	

10/802617

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CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7		/				
8		/				
9		/				
10		/				
11	/					
12		/				
13		/				
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42						
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44						
45						
46						
47						
48						
49						
50						
Total Indep	2					
Total Depend	18					
Total Claims	20					

May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend
51						
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100						
Total Indep						
Total Depend						
Total Claims						